Se N ID-493 (80216)
MS Patent Application
C mmissioner For Patents
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 lexandria, VA 22313-1450
696
Transmitted herewith for filing is the patent
Çapplicati n f:

I HEREBY CERTIFY THIS PAPER OR FEE IS BEING DEPOSITED WITH THE U.S. POSTAL SERVICE "EXPRESS MAIL POST OFFICE TO ADDRESSEE" SERVICE UNDER 37 CFR 1.10 ON THE DATE INDICATED BELOW AND IS ADDRESSED TO: MS PATENT APPLICATION, PO BOX 1450, ALEXANDRIA, VA 22313-1450.

Sico

EXPRESS MAIL NO: EV331552934US

DATE OF DEPOSIT: F bruary 12, 2004

NAME: __JUSTIN GOREE SIGNATURE:

Inventors:

Shaibal ROY

David James CLARKE

For:

COMMUNICATIONS SYSTEM INCLUDING PROTOCOL INTERFACE DEVICE FOR USE WITH MULTIPLE OPERATING PROTOCOLS AND RELATED METHODS

Enclosed are:

Patent Application: 65 pages, 28 claims

[X] 13 sheets of drawings

The suggested drawing figure to be published is FIG.

A declaration and power of attorney

An assignment in the name of TEAMON SYSTEMS, INC.

Citation Under 37 CFR 1.97 and PTO-1449

Assignee info:

Name:

TEAMON SYSTEMS, INC.

Address:

1180 NW Maple Street, Suite 201

Issaquah, WA 98027

State of

incorporation: Delaware

[X] Applicant claims priority benefit to the following U.S. application(s):

Application No.: 60/494,235 Filing Date: August 11, 2003 Application No.: 60/494,255 Filing Date: August 11, 2003 Application No.: 60/493,163

Filing Date: August 7, 2003

Filing Date: August 7, 2003 Application No.: 60/493,167

Application No.: 60/494,326 Filing Date: August 11, 2003 Application No.: 60/494,234 Filing Date: August 11, 2003 Application No.: 60/493,165 Filing Date: August 7, 2003

The filing fee has been calculated as shown below:

	(Col. 1)		(Col. 2)	SMALL ENTITY		LARGE E	LARGE ENTITY	
FOR:	# FILED		# EXTRA	RATE	FEE	RATE	FEE	
BASIC FEE					\$ 385		\$ 770	
TOTAL CLAIMS	28	-20	8	X 9	\$	X 18	\$ 144	
INDEP CLAIMS	5	- 3	2	X 43	\$	X 86	\$ 172	
* If the difference in Col. 1 is less than "0", enter "0" in Col. 2.				TOTAL	\$	TOTAL	\$ 1086	

THE COMMISSIONER IS HEREBY AUTHORIZED TO CHARGE THE FEE IN THE AMOUNT OF \$1086.00 TO THE CREDIT CARD NOTED IN THE ATTACHED CREDIT CARD PAYMENT FORM [X]

[X] The Commissioner is authorized to charge or credit any discrepancies in fee amounts to Deposit Account No. 01-0484.

[X] PLEASE ADDRESS CORRESPONDENCE TO ATTORNEY OF RECORD: CHRISTOPHER F. REGAN

[X] Please associate this application with Customer No. 27975.

ADEMARK OFFICE

CHRISTOPHER F. REGAN

Reg. No. 34,906

February 12, 2004

Date